

REPORT OF RECEIPTS AND DISBURSEMENTS

1 / 62

BY AN AUTHORIZED COMMITTEE OF A CANDIDATE FOR THE OFFICE OF PRESIDENT OR VICE-PRESIDENT

1. NAME OF COMMITTEE (in full) Chris Dodd For President Inc		2. IDENTIFICATION NUMBER C00431379	
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported PO Box 270701			
CITY, STATE, and ZIP CODE West Hartford CT 06127		3. IS THIS REPORT FOR : <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General	

4. TYPE OF REPORT (Check here ☐ if this is a Termination Report.)

☐ April 15 Quarterly Report

☒ July 15 Quarterly Report

☐ October 15 Quarterly Report

☐ January 31 Year End Report

Monthly Report Due On:

<input type="checkbox"/> February 20	<input type="checkbox"/> June 20	<input type="checkbox"/> October 20
<input type="checkbox"/> March 20	<input type="checkbox"/> July 20	<input type="checkbox"/> November 20
<input type="checkbox"/> April 20	<input type="checkbox"/> August 20	<input type="checkbox"/> December 20
<input type="checkbox"/> May 20	<input type="checkbox"/> September 20	<input type="checkbox"/> January 31

☐ Twelfth day report preceding _____ (Type of Election)

election on _____ in the State of _____

☐ Thirtieth day report following the General Election on _____

on _____

IS THIS REPORT AN AMENDMENT ☐ YES ☒ NO

5. COVERING PERIOD	FROM	THROUGH
	04/01/2010	06/30/2010

SUMMARY	6. CASH ON HAND AT BEGINNING OF THE REPORTING PERIOD	151741.00
	7. TOTAL RECEIPTS THIS PERIOD (From Line 22, Column A, Page 2)	107472.74
	8. SUBTOTAL (Lines 6 and 7)	259213.74
	9. TOTAL DISBURSEMENTS THIS PERIOD (From Line 30, Column A, Page 2)	124858.67
	10. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Subtract Line 9 from 8)	134355.07
	11. DEBTS AND OBLIGATIONS OWED TO THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P)	0.00
	12. DEBTS AND OBLIGATIONS OWED BY THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P)	261361.78
	13. EXPENDITURES SUBJECT TO LIMITATION	15722905.15
NET ELECTION CYCLE-TO-DATE CONTRIBUTIONS AND EXPENDITURES	14. NET CONTRIBUTIONS (Other than Loans) (Subtract Line 28d, Column B from 17e, Column B, Page 2)	9563553.20
	15. NET OPERATING EXPENDITURES (Subtract Line 20a, Column B from 23, Column B, Page 2)	15728445.15

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct, and complete.

Type or Print Name of Treasurer Kathryn Damato	Date 07/15/2010
Signature of Treasurer	

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g. All previous versions of FEC FORM 3P are obsolete and should no longer be used.

For further information contact:	Federal Election Commission 999 E Street, N.W. Washington, DC 20463	FEC FORM 3P (01/2001)
	Toll Free 800-424-9530 Local 202-694-1100	

DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS

(PAGE 2, FEC FORM 3P)

Name of committee (in full)

Chris Dodd For President Inc

Report Covering the Period

From: 04/01/2010

To: 06/30/2010

I. RECEIPTS		COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
16. FEDERAL FUNDS (Itemize on Schedule A-P)	.....	0.00	1961741.71
17. CONTRIBUTIONS (other than loans) FROM :			
(a) Individuals/Persons Other Than Political Committees	.....	107400.00	10196755.20
(b) Political Party Committees	.....	0.00	100.00
(c) Other Political Committees	.....	0.00	750698.30
(d) The Candidate	.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a) , 17(b), 17(c), 17(d))		107400.00	10947553.50
18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	.....	0.00	4860755.00
19. LOANS RECEIVED:			
(a) Loans Received From or Guaranteed by Candidate	.....	0.00	0.00
(b) Other Loans	.....	0.00	1302811.25
(c) TOTAL LOANS (Add 19(a) and 19(b))	.....	0.00	1302811.25
20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.) :			
(a) Operating	.....	72.74	87759.76
(b) Fundraising	.....	0.00	5540.00
(c) Legal and Accounting	.....	0.00	0.00
(d) TOTAL OFFSETS TO OPERATING EXPENDITURES (Add 20(a), 20(b) and 20(c))		72.74	93299.76
21. OTHER RECEIPTS (Dividend, Interest, etc.)	.....	0.00	55536.06
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d), 21)	.....	107472.74	19221697.28
II. DISBURSEMENTS			
23. OPERATING EXPENDITURES	.....	124658.67	15816204.91
24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	.....	0.00	440110.00
25. FUNDRAISING DISBURSEMENTS	.....	0.00	0.00
26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS	.....	0.00	0.00
27. LOAN REPAYMENTS MADE :			
(a) Repayment of Loans made or Guaranteed by Candidate	.....	0.00	0.00
(b) Other Repayments	.....	0.00	1302811.25
(c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b))	.....	0.00	1302811.25
28. REFUNDS OF CONTRIBUTIONS TO :			
(a) Individuals/Persons Other Than Political Committees	.....	200.00	1206742.00
(b) Political Party Committees	.....	0.00	0.00
(c) Other Political Committees	.....	0.00	177258.30
(d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b), 28(c))	.....	200.00	1384000.30
29. OTHER DISBURSEMENTS	.....	0.00	11000.00
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29)	.....	124858.67	18954126.46
III. CONTRIBUTED ITEMS (Stock, Art Objects, etc.)			
31. ITEMS ON HAND TO BE LIQUIDATED (Attach List)	.....	0.00	

ALLOCATION OF PRIMARY EXPENDITURES BY STATE FOR A PRESIDENTIAL CANDIDATE
 (Used Only by Primary Committees Receiving or Expecting to Receive Federal Funds)
 (PAGE 3, FEC FORM 3P)

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1. NAME OF COMMITTEE (in full)

Chris Dodd For President Inc

ADDRESS (number and street)

PO Box 270701

CITY, STATE, and ZIP CODE

West Hartford

CT

06127

2. IDENTIFICATION NUMBER

C00431379

ALLOCATION BY STATE

STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE	STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE
Alabama	0.00	0.00	Nebraska	0.00	0.00
Alaska	0.00	0.00	Nevada	0.00	31412.23
Arizona	0.00	0.00	New Hampshire	0.00	695420.15
Arkansas	0.00	0.00	New Jersey	0.00	0.00
California	0.00	0.00	New Mexico	0.00	0.00
Colorado	0.00	0.00	New York	0.00	0.00
Connecticut	0.00	0.00	North Carolina	0.00	0.00
Delaware	0.00	0.00	North Dakota	0.00	0.00
District of Columbia	0.00	41.21	Ohio	0.00	0.00
Florida	0.00	0.00	Oklahoma	0.00	0.00
Georgia	0.00	0.00	Oregon	0.00	0.00
Hawaii	0.00	0.00	Pennsylvania	0.00	0.00
Idaho	0.00	0.00	Rhode Island	0.00	0.00
Illinois	0.00	0.00	South Carolina	0.00	533.78
Indiana	0.00	0.00	South Dakota	0.00	0.00
Iowa	0.00	2631492.25	Tennessee	0.00	0.00
Kansas	0.00	0.00	Texas	0.00	0.00
Kentucky	0.00	0.00	Utah	0.00	0.00
Louisiana	0.00	0.00	Vermont	0.00	0.00
Maine	0.00	0.00	Virginia	0.00	0.00
Maryland	0.00	68.00	Washington	0.00	0.00
Massachussetts	0.00	0.00	West Virginia	0.00	0.00
Michigan	0.00	0.00	Wisconsin	0.00	0.00
Minnesota	0.00	0.00	Wyoming	0.00	0.00
Mississippi	0.00	0.00	Puerto Rico	0.00	0.00
Missouri	0.00	0.00	Guam	0.00	0.00
Montana	0.00	0.00	Virgin Islands	0.00	0.00
			TOTALS	0.00	3358967.62

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 4 / 62

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Act Blue

Mailing Address

P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 1 / 2 0 1 0

Amount of Each Receipt this Period

6400.00

[MEMO ITEM]

Transaction ID: AB532A872F5C245198ED

B.

Full Name (Last, First, Middle Initial)

Mitesh Amin

Mailing Address

65 Sheridan Drive

City

Atlanta

State

GA

Zip Code

30305-3101

FEC ID number of contributing
federal political committee.

Name of Employer
Self Employed

Occupation
Hotelier

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 6 / 2 0 1 0

Amount of Each Receipt this Period

2000.00

Transaction ID: A90B14B6E750840B5A74

C.

Full Name (Last, First, Middle Initial)

Jerry R. Anderson

Mailing Address

P.O. Box 1633

City

Provo

State

UT

Zip Code

84603-1633

FEC ID number of contributing
federal political committee.

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 0

Amount of Each Receipt this Period

2300.00

Transaction ID: AE57C9D5031474654948

SUBTOTAL of Receipts This Page (optional)

4300.00

TOTAL This Period (last page this line number only)

Schedule A-P

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 5 / 62

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

C. David Cabanilla

Mailing Address

365 West 3800 North

City

Provo

State

UT

Zip Code

84604-4980

FEC ID number of contributing
federal political committee.

Name of Employer
FedEx

Occupation
Pilot

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 0

Amount of Each Receipt this Period

2300.00

Transaction ID: AC854453B131F40D797B

B.

Full Name (Last, First, Middle Initial)

Nathalie Daniel

Mailing Address

315 W 33rd Street

Apt. 34B

City

New York

State

NY

Zip Code

10001-2796

FEC ID number of contributing
federal political committee.

Name of Employer
Ernst & Young LLP

Occupation
Auditor

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 6 / 2 0 1 0

Amount of Each Receipt this Period

2300.00

Transaction ID: A497AD5DE53A94132820

C.

Full Name (Last, First, Middle Initial)

Neelson Daniel

Mailing Address

315 W 33rd Street

Apt. 34B

City

New York

State

NY

Zip Code

10001-2796

FEC ID number of contributing
federal political committee.

Name of Employer
Ernst & Young LLP

Occupation
Manager

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 6 / 2 0 1 0

Amount of Each Receipt this Period

2300.00

Transaction ID: A5AFB768C828545669FD

SUBTOTAL of Receipts This Page (optional)

6900.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Akaterini Dinas-Raptis

Mailing Address

43-23 222 Street

City

Bayside

State

NY

Zip Code

11361

FEC ID number of contributing
federal political committee.

Name of Employer
Forest Pharma

Occupation

Pharmaceutical Executive

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 6 / 2 0 1 0

Amount of Each Receipt this Period

2300.00

Transaction ID: A555296B0B65D43B6B2D

B.

Full Name (Last, First, Middle Initial)

Maria Doulos

Mailing Address

63-33 253rd Street

City

Little Neck

State

NY

Zip Code

11362-2407

FEC ID number of contributing
federal political committee.

Name of Employer
Admiral Insurance

Occupation

Underwriter

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 6 / 2 0 1 0

Amount of Each Receipt this Period

1000.00

Transaction ID: AE4C7FE36FB644F0DB2E

C.

Full Name (Last, First, Middle Initial)

Charlene M Eisen

Mailing Address

108 Garfield Street

City

Garden City

State

NY

Zip Code

11530-2407

FEC ID number of contributing
federal political committee.

Name of Employer
N/A

Occupation

Homemaker

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 6 / 2 0 1 0

Amount of Each Receipt this Period

2300.00

Transaction ID: AB022A2C43290432BAE5

SUBTOTAL of Receipts This Page (optional)

5600.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Robert F. Eisen

Mailing Address

108 Garfield Street

City

Garden City

State

NY

Zip Code

11530-2407

FEC ID number of contributing
federal political committee.

Name of Employer
FNB

Occupation
Banker

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 6 / 2 0 1 0

Amount of Each Receipt this Period

2300.00

Transaction ID: AC576DEE2855943F29A3

B.

Full Name (Last, First, Middle Initial)

Richard E Farley

Mailing Address

80 Pine Street

19th Floor

City

New York

State

NY

Zip Code

10005-1702

FEC ID number of contributing
federal political committee.

Name of Employer
Cahill Gordon & Reindel
LLP

Occupation
Attorney

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 4 / 2 0 1 0

Amount of Each Receipt this Period

1000.00

Transaction ID: AABF91231EE0648FABE5

C.

Full Name (Last, First, Middle Initial)

Luis Fernandez

Mailing Address

246 Eden Road

City

Palm Beach

State

FL

Zip Code

33480-3316

FEC ID number of contributing
federal political committee.

Name of Employer
American Sugar Refining

Occupation
President

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 4 / 2 0 1 0

Amount of Each Receipt this Period

2000.00

Transaction ID: ADD578FC9D72E4FD39BF

SUBTOTAL of Receipts This Page (optional)

5300.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 8 / 62

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Lambros Flouras

Mailing Address

45 Queens Lane

City

Manhasset Hills

State

NY

Zip Code

11040-1213

FEC ID number of contributing
federal political committee.

Name of Employer
Pallas Hotel

Occupation

Food Manager

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 6 / 2 0 1 0

Amount of Each Receipt this Period

2300.00

Transaction ID: A6E66FEFED6124CDCA5F

B.

Full Name (Last, First, Middle Initial)

Mary Flouras

Mailing Address

45 Queens Lane

City

New Hyde Park

State

NY

Zip Code

11040-1213

FEC ID number of contributing
federal political committee.

Name of Employer
N/A

Occupation

Homemaker

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 6 / 2 0 1 0

Amount of Each Receipt this Period

2300.00

Transaction ID: ACB2D8A9D4AC6477E8F5

C.

Full Name (Last, First, Middle Initial)

Holli Forrest

Mailing Address

3841 North 370 West

City

Provo

State

UT

Zip Code

84604-4969

FEC ID number of contributing
federal political committee.

Name of Employer
Self -Employed

Occupation

Consultant

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 0

Amount of Each Receipt this Period

2300.00

Transaction ID: A9AB7209F067C4AC1B90

SUBTOTAL of Receipts This Page (optional)

6900.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 9 / 62

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Melissa P. Gaston

Mailing Address

220 Riverside Blvd

Apt. 12E

City

State

Zip Code

New York

NY

10069-1008

FEC ID number of contributing
federal political committee.

Name of Employer

N/A

Occupation

Retired

Receipt For:

2008

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 6 / 2 0 1 0

Amount of Each Receipt this Period

2300.00

Transaction ID: AE19FB9F2EAAF475D843

B.

Full Name (Last, First, Middle Initial)

Brendan L. Ince

Mailing Address

220 Riverside Blvd.

Apt. 10K

City

State

Zip Code

New York

NY

10069-1007

FEC ID number of contributing
federal political committee.

Name of Employer

Mann Realty

Occupation

Property Manager

Receipt For:

2008

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 6 / 2 0 1 0

Amount of Each Receipt this Period

2300.00

Transaction ID: A497B7EB440234EAA970

C.

Full Name (Last, First, Middle Initial)

Alexia P Kalargiros

Mailing Address

1235 Park Avenue

Apt. 3B

City

State

Zip Code

New York

NY

10128-1759

FEC ID number of contributing
federal political committee.

Name of Employer

Balyasny Asset Mngt

Occupation

Auditor

Receipt For:

2008

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 6 / 2 0 1 0

Amount of Each Receipt this Period

2300.00

Transaction ID: A43923DDF9CAF49ED8E3

SUBTOTAL of Receipts This Page (optional)

6900.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 62

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Anastasia Kalargiros

Mailing Address

834 Hunt Lane

City

Manhasset

State

NY

Zip Code

11030-2841

FEC ID number of contributing
federal political committee.Name of Employer
N/A

Occupation

Homemaker

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	0

Amount of Each Receipt this Period

2300.00

Transaction ID: AAB6F0704AD3B45FF953

B.

Full Name (Last, First, Middle Initial)

Anna L. Kalargiros

Mailing Address

47-25 245th Street

City

Little Neck

State

NY

Zip Code

11362-1107

FEC ID number of contributing
federal political committee.Name of Employer
N/A

Occupation

Student

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	0

Amount of Each Receipt this Period

2300.00

Transaction ID: A644B833883D74C17AD1

C.

Full Name (Last, First, Middle Initial)

Christos D Kalargiros

Mailing Address

1235 Park Avenue

Apt. 3B

City

New York

State

NY

Zip Code

10128-1759

FEC ID number of contributing
federal political committee.Name of Employer
Technetek

Occupation

General Contractor

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	0

Amount of Each Receipt this Period

2300.00

Transaction ID: A6D4BBE7339054F8AAFF

SUBTOTAL of Receipts This Page (optional)

6900.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 62

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Christos A Kalargiros

Mailing Address

47-25 245 Street

City

Little Neck

State

NY

Zip Code

11362

FEC ID number of contributing
federal political committee.Name of Employer
Orion ConstructionOccupation
Contractor

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	0

Amount of Each Receipt this Period

2300.00

Transaction ID: A7A3733D1322642E8B90

B.

Full Name (Last, First, Middle Initial)

George Kalargiros

Mailing Address

253-11 Cullman Avenue

City

Little Neck

State

NY

Zip Code

11362

FEC ID number of contributing
federal political committee.Name of Employer
Self EmployedOccupation
Contractor

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	0

Amount of Each Receipt this Period

2300.00

Transaction ID: A3854255263DD445DA3B

C.

Full Name (Last, First, Middle Initial)

Ioannis Kalargiros

Mailing Address

834 Hunt Lane

City

Manhasset

State

NY

Zip Code

11030-2841

FEC ID number of contributing
federal political committee.Name of Employer
TechnetekOccupation
General Contractor

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	0

Amount of Each Receipt this Period

2300.00

Transaction ID: ADFB8AFC514EB408290F

SUBTOTAL of Receipts This Page (optional)

6900.00

TOTAL This Period (last page this line number only)

Schedule A-P

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 62

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Jennifer S. Lowndes

Mailing Address

1184 E Rock Springs Road NE

City

Atlanta

State

GA

Zip Code

30306-2265

FEC ID number of contributing
federal political committee.Name of Employer
Sutherland Asbill et alOccupation
Attorney

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	6	/	2	0	1	0

Amount of Each Receipt this Period

2300.00

Transaction ID: A2DCB67219FD54E36846

B.

Full Name (Last, First, Middle Initial)

Helen Maliagros

Mailing Address

304 Community Drive

Apt. 3G

City

Manhasset

State

NY

Zip Code

11030-3856

FEC ID number of contributing
federal political committee.Name of Employer
NorthshoreOccupation
Physician

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	6	/	2	0	1	0

Amount of Each Receipt this Period

2300.00

Transaction ID: A4CC15B21247F426AA2E

C.

Full Name (Last, First, Middle Initial)

Jill K. Marchesi

Mailing Address

4755 Clay Peak Drive

City

Las Vegas

State

NV

Zip Code

89129-2222

FEC ID number of contributing
federal political committee.Name of Employer
N/AOccupation
Homemaker

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	6	/	2	0	1	0

Amount of Each Receipt this Period

2500.00

Transaction ID: AA340F9055037456E95C

SUBTOTAL of Receipts This Page (optional)

7100.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 62

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Raymond McDaniel

Mailing Address

411 West End Avenue

City

New York

State

NY

Zip Code

10024-5719

FEC ID number of contributing
federal political committee.

Name of Employer

Moody's Investors

Occupation

Executive

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	1	0

Amount of Each Receipt this Period

1000.00

Transaction ID: A6DB8CE2E891347FBA5E

B.

Full Name (Last, First, Middle Initial)

Charles Merinoff

Mailing Address

60 East 42nd Street

Suite 1915

City

New York

State

NY

Zip Code

10165-6230

FEC ID number of contributing
federal political committee.

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	1	0

Amount of Each Receipt this Period

2300.00

Transaction ID: AAB5C18899B314FDCBBA

C.

Full Name (Last, First, Middle Initial)

George J. Mihalios

Mailing Address

924 Malba Drive

City

Whitestone

State

NY

Zip Code

11357-1026

FEC ID number of contributing
federal political committee.

Name of Employer

Orion Construction

Occupation

Contractor

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	0

Amount of Each Receipt this Period

2300.00

Transaction ID: AF6F5B6E35AAC4EFDA8C

SUBTOTAL of Receipts This Page (optional)

5600.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 62

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Maria L Mihalios

Mailing Address

924 Malba Drive

City

Whitestone

State

NY

Zip Code

11357-1026

FEC ID number of contributing
federal political committee.Name of Employer
Self EmployedOccupation
dental hygienist

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	0

Amount of Each Receipt this Period

2300.00

Transaction ID: AD314141B66414A6AACA

B.

Full Name (Last, First, Middle Initial)

Dominic Moller

Mailing Address

34 Henry Street

City

Valley Stream

State

NY

Zip Code

11580-1929

FEC ID number of contributing
federal political committee.Name of Employer
Moller & Moller ElectricalOccupation
Owner

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	0

Amount of Each Receipt this Period

2300.00

Transaction ID: A7DEC58CC2B5D4C299C3

C.

Full Name (Last, First, Middle Initial)

Diana E. Moller

Mailing Address

34 Henry Street

City

Valley Stream

State

NY

Zip Code

11580-1929

FEC ID number of contributing
federal political committee.Name of Employer
Self EmployedOccupation
Massage Therapist

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	0

Amount of Each Receipt this Period

2300.00

Transaction ID: AC568E821B49F400AA81

SUBTOTAL of Receipts This Page (optional)

6900.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 62

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Mary E. O'Connell

Mailing Address

169 E 91st Street

City

New York

State

NY

Zip Code

10128-2476

FEC ID number of contributing
federal political committee.

Name of Employer

American Express

Occupation

Manager

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	6	/	2	0	1	0

Amount of Each Receipt this Period

2300.00

Transaction ID: AE8AD0DCBBB8D44049D8

B.

Full Name (Last, First, Middle Initial)

Rishi Patel

Mailing Address

2860 Cravey Drive

City

Atlanta

State

GA

Zip Code

30345-1420

FEC ID number of contributing
federal political committee.

Name of Employer

Self Employed

Occupation

Real Estate

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	6	/	2	0	1	0

Amount of Each Receipt this Period

2300.00

Transaction ID: AE44E7C5782824CF3BFD

C.

Full Name (Last, First, Middle Initial)

Sachin Patel

Mailing Address

2100 Parklake Drive

Suite A

City

Decatur

State

GA

Zip Code

30033

FEC ID number of contributing
federal political committee.

Name of Employer

Atlanta EB-S Regional

Occupation

Principal

Receipt For: 2008

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

2100.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	6	/	2	0	1	0

Amount of Each Receipt this Period

2100.00

Transaction ID: A964FDE83A485490499D

SUBTOTAL of Receipts This Page (optional)

6700.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 16 / 62

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Monica Petro

Mailing Address

714 S. Eastridge Drive

City

Springville

State

UT

Zip Code

84663-3911

FEC ID number of contributing
federal political committee.

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 1 0

Amount of Each Receipt this Period

2300.00

Transaction ID: A5EE116DC71BD443DBC1

B.

Full Name (Last, First, Middle Initial)

George Raptis

Mailing Address

43-23 222 Street

City

Bayside

State

NY

Zip Code

11361

FEC ID number of contributing
federal political committee.

Name of Employer
Mega Construction

Occupation
Construction

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 6 / 2 0 1 0

Amount of Each Receipt this Period

2300.00

Transaction ID: AB9C39C92D6D649CCA07

C.

Full Name (Last, First, Middle Initial)

Marnie Rawle

Mailing Address

301 W 3540 N

City

Provo

State

UT

Zip Code

84604-5600

FEC ID number of contributing
federal political committee.

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 1 0

Amount of Each Receipt this Period

2300.00

Transaction ID: A21E59B3A19B845AC9B9

SUBTOTAL of Receipts This Page (optional)

6900.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 62

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Matthew J. Scott

Mailing Address

100 Maiden Lane

Apt. 1209

City

New York

State

NY

Zip Code

10038-4880

FEC ID number of contributing
federal political committee.Name of Employer
Allian & BernsteinOccupation
Trader

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	0

Amount of Each Receipt this Period

2300.00

Transaction ID: A66620B49784F4E71AE6

B.

Full Name (Last, First, Middle Initial)

Gilbert B Sherr

Mailing Address

290 Willard Drive

City

Hewlett

State

NY

Zip Code

11557-1842

FEC ID number of contributing
federal political committee.Name of Employer
Self EmployedOccupation
Cpa

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	0

Amount of Each Receipt this Period

2300.00

Transaction ID: A1D0F4B5E89184450ACA

C.

Full Name (Last, First, Middle Initial)

Myra E. Sherr

Mailing Address

290 Willard Drive

City

Hewlett

State

NY

Zip Code

11557-1842

FEC ID number of contributing
federal political committee.Name of Employer
N/AOccupation
Homemaker

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	0

Amount of Each Receipt this Period

2300.00

Transaction ID: AB93F7324824A4BC2A5C

SUBTOTAL of Receipts This Page (optional)

6900.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 18 / 62

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Anthony G Testa

Mailing Address

28 Stepping Stone Cres

City

State

Zip Code

Dix Hills

NY

11746-5024

FEC ID number of contributing
federal political committee.

Name of Employer

Atset Electrical

Occupation

Owner

Receipt For:

2008

☒ X

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 6 / 2 0 1 0

Amount of Each Receipt this Period

2300.00

Transaction ID: A91B04C732B7940A7955

B.

Full Name (Last, First, Middle Initial)

Linda Testa

Mailing Address

28 Stepping Stone Cres

City

State

Zip Code

Dix Hills

NY

11746-5024

FEC ID number of contributing
federal political committee.

Name of Employer

Good Samaritan Hosp

Occupation

RN

Receipt For:

2008

☒ X

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 6 / 2 0 1 0

Amount of Each Receipt this Period

2300.00

Transaction ID: A36A345088E1D4E84AE2

C.

Full Name (Last, First, Middle Initial)

Maria Theodorakis

Mailing Address

834 Hunt Lane

City

State

Zip Code

Manhasset

NY

11030-2841

FEC ID number of contributing
federal political committee.

Name of Employer

N/A

Occupation

Retired

Receipt For:

2008

☒ X

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 6 / 2 0 1 0

Amount of Each Receipt this Period

500.00

Transaction ID: A6EA6D716A124486A9F7

SUBTOTAL of Receipts This Page (optional)

5100.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 19 / 62

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Spiros J Voutsinas

Mailing Address

2425 Surf Drive

City

Bellmore

State

NY

Zip Code

11710-4832

FEC ID number of contributing
federal political committee.

Name of Employer
Atlantic Bank

Occupation
President

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 4 / 2 0 1 0

Amount of Each Receipt this Period

1000.00

Transaction ID: A6E2DF0FE67D24AF1B71

B.

Full Name (Last, First, Middle Initial)

K.W. Walker

Mailing Address

1173 S 1180 E

City

Spanish Fork

State

UT

Zip Code

84660-5912

FEC ID number of contributing
federal political committee.

Name of Employer
N/A

Occupation
Homemaker

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 0

Amount of Each Receipt this Period

2300.00

Transaction ID: AF3E4B37EEC7C4A72B0A

C.

Full Name (Last, First, Middle Initial)

Rachele H. Walker

Mailing Address

722 E Sunburst Lane

City

Alpine

State

UT

Zip Code

84004-1201

FEC ID number of contributing
federal political committee.

Name of Employer
N/A

Occupation
Homemaker

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 1 0

Amount of Each Receipt this Period

2300.00

Transaction ID: A608B42B8A0984442A0F

SUBTOTAL of Receipts This Page (optional)

5600.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 62

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Lindsay L. Webster

Mailing Address

184 Mills Avenue

City

Spartanburg

State

SC

Zip Code

29302-1940

FEC ID number of contributing
federal political committee.

Name of Employer

N/A

Occupation

Homemaker

Receipt For:

2008

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	6		2	0	1	0

Amount of Each Receipt this Period

2300.00

Transaction ID: A87BF57B8BE95497C9AC

B.

Full Name (Last, First, Middle Initial)

Allen K. Young

Mailing Address

75 South 300 West

City

Provo

State

UT

Zip Code

84601-4352

FEC ID number of contributing
federal political committee.

Name of Employer

Self Employed

Occupation

Attorney

Receipt For:

2008

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	6		2	0	1	0

Amount of Each Receipt this Period

2300.00

Transaction ID: A030E94D032A543C0B75

C.

Full Name (Last, First, Middle Initial)

Tyler S. Young

Mailing Address

465 E 835 N

City

Orem

State

UT

Zip Code

84097-3366

FEC ID number of contributing
federal political committee.

Name of Employer

Self Employed

Occupation

Attorney

Receipt For:

2008

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	6		2	0	1	0

Amount of Each Receipt this Period

2300.00

Transaction ID: A32B3E325296F498FA81

SUBTOTAL of Receipts This Page (optional)

6900.00

TOTAL This Period (last page this line number only)

107400.00

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 21 / 62

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) Act Blue Mailing Address P.O. Box 382110	Transaction ID: B9177CD421380492397C Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 1 / 2 0 1 0</div> </div>
City State Zip Code Cambridge MA 02238 Purpose of Disbursement Processing Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Amount of Each Disbursement this Period <div>252.80</div>
B. Full Name (Last, First, Middle Initial) Advantage Payroll Services Mailing Address 126 Marrow Road City State Zip Code Auburn ME 04210 Purpose of Disbursement Processing Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B360C93E8BF2A4BBE9BB Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 1 / 2 0 1 0</div> </div> Amount of Each Disbursement this Period <div>72.96</div>
C. Full Name (Last, First, Middle Initial) Advantage Payroll Services Mailing Address 126 Marrow Road City State Zip Code Auburn ME 04210 Purpose of Disbursement Processing Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B725EB4F98E7B43ACBFF Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 5 / 2 0 1 0</div> </div> Amount of Each Disbursement this Period <div>83.53</div>

SUBTOTAL of Disbursements This Page (optional) ►

409.29

TOTAL This Period (last page this line number only) ►

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 22 / 62

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) Advantage Payroll Services	Transaction ID: B778FFF649A434AB0B57 Date of Disbursement																				
Mailing Address 126 Marrow Road	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		1	5		2	0	1	0												
City Auburn State ME Zip Code 04210 Purpose of Disbursement Payroll Processing Fee Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>1</td><td>1</td><td>4</td><td>.</td><td>2</td><td>0</td> </tr> </table>	1	1	4	.	2	0														
1	1	4	.	2	0																
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				
B. Full Name (Last, First, Middle Initial) Advantage Payroll Services	Transaction ID: BB4ABA6A6FD6D454B86B Date of Disbursement																				
Mailing Address 126 Marrow Road	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	5		2	0	1	0												
City Auburn State ME Zip Code 04210 Purpose of Disbursement Payroll Processing Fee Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>1</td><td>1</td><td>4</td><td>.</td><td>2</td><td>0</td> </tr> </table>	1	1	4	.	2	0														
1	1	4	.	2	0																
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				
C. Full Name (Last, First, Middle Initial) American Express	Transaction ID: B71F75F72F3D04A0A93A Date of Disbursement																				
Mailing Address PO Box 981535	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	1		2	0	1	0												
City El Paso State TX Zip Code 79998-1535 Purpose of Disbursement Processing Fee Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>5</td><td>.</td><td>9</td><td>5</td> </tr> </table>	5	.	9	5																
5	.	9	5																		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																				
SUBTOTAL of Disbursements This Page (optional)	<table border="1"> <tr> <td>2</td><td>3</td><td>4</td><td>.</td><td>3</td><td>5</td> </tr> </table>	2	3	4	.	3	5														
2	3	4	.	3	5																
TOTAL This Period (last page this line number only)	<table border="1"> <tr> <td> </td><td> </td><td> </td><td> </td><td> </td><td> </td> </tr> </table>																				

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 23 / 62

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) American Express	Transaction ID: BE9E14E6380C04954ABC Date of Disbursement																				
Mailing Address PO Box 981535	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	4		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		0	4		2	0	1	0												
City El Paso State TX Zip Code 79998-1535	Amount of Each Disbursement this Period																				
Purpose of Disbursement Processing Fee Candidate Name	<table border="1"> <tr> <td colspan="10">5.95</td> </tr> </table>	5.95																			
5.95																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) American Express	Transaction ID: BC3D71D22BC294A3392D Date of Disbursement																				
Mailing Address PO Box 981535	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	3		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		0	3		2	0	1	0												
City El Paso State TX Zip Code 79998-1535	Amount of Each Disbursement this Period																				
Purpose of Disbursement Processing Fee Candidate Name	<table border="1"> <tr> <td colspan="10">5.95</td> </tr> </table>	5.95																			
5.95																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) American Red Cross	Transaction ID: B5737AB9F9300463493D Date of Disbursement																				
Mailing Address 209 Farmington Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	6		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	6		2	0	1	0												
City Farmington State CT Zip Code 06032	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution for Flood Victims Candidate Name	<table border="1"> <tr> <td colspan="10">2500.00</td> </tr> </table>	2500.00																			
2500.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

2511.90

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 24 / 62

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) Aristotle Publishing	Transaction ID: B638DB49EAE484619B78 Date of Disbursement																				
Mailing Address 205 Pennsylvania Ave	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	1		2	0	1	0												
City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period																				
Purpose of Disbursement Software Fee Candidate Name	<table border="1"> <tr> <td colspan="10">2000.00</td> </tr> </table>	2000.00																			
2000.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Authorize.net	Transaction ID: BAEE27ED5C2344805927 Date of Disbursement																				
Mailing Address 915 South 500 East, Ste. 200	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	2		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	2		2	0	1	0												
City American Fork State UT Zip Code 84003-3373	Amount of Each Disbursement this Period																				
Purpose of Disbursement Processing Fee Candidate Name	<table border="1"> <tr> <td colspan="10">25.00</td> </tr> </table>	25.00																			
25.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Authorize.net	Transaction ID: BEAE8A0F7ABA745EBA23 Date of Disbursement																				
Mailing Address 915 South 500 East, Ste. 200	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	4		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		0	4		2	0	1	0												
City American Fork State UT Zip Code 84003-3373	Amount of Each Disbursement this Period																				
Purpose of Disbursement Processing Fee Candidate Name	<table border="1"> <tr> <td colspan="10">25.00</td> </tr> </table>	25.00																			
25.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

2050.00

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 25 / 62

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) Authorize.net	Transaction ID: B74268627840B44C48D1 Date of Disbursement
Mailing Address 915 South 500 East, Ste. 200	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 2 / 2 0 1 0</div> </div>
City American Fork State UT Zip Code 84003-3373	Amount of Each Disbursement this Period
Purpose of Disbursement Processing Fee	<div>25.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: B9F364F113BDE4E7B83F Date of Disbursement
Mailing Address P.O. Box 830175 Acct Analysis	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 5 / 2 0 1 0</div> </div>
City Dallas State TX Zip Code 75283-0175	Amount of Each Disbursement this Period
Purpose of Disbursement Stamp & deposit tickets	<div>69.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) BankCard	Transaction ID: B31B9A7F2CE4E4DB980D Date of Disbursement
Mailing Address	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 5 / 2 0 1 0</div> </div>
City State Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement Processing Fee	<div>34.95</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

128.95

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) BankCard Mailing Address City State Zip Code Purpose of Disbursement Processing Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B57777B9FB24D4DE8879 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 1 0 Amount of Each Disbursement this Period 49.95
B. Full Name (Last, First, Middle Initial) BankCard Mailing Address City State Zip Code Purpose of Disbursement Processing Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B579FF9AFD6D849E6BC6 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 3 / 2 0 1 0 Amount of Each Disbursement this Period 88.95
C. Full Name (Last, First, Middle Initial) CT Dept Taxation Mailing Address 25 Sigourney St. City State Zip Code Hartford CT 06106 Purpose of Disbursement Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B984DEDCF43FD4FF7840 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 1 0 Amount of Each Disbursement this Period 69.26

SUBTOTAL of Disbursements This Page (optional) ►

208.16

TOTAL This Period (last page this line number only) ►

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 27 / 62

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) CT Dept Taxation <hr/> Mailing Address 25 Sigourney St. <hr/> <table> <tr> <td>City Hartford</td> <td>State CT</td> <td>Zip Code 06106</td> </tr> </table> <hr/> <table> <tr> <td>Purpose of Disbursement Taxes</td> <td rowspan="2"><div>Category/ Type</div></td> </tr> <tr> <td>Candidate Name</td> </tr> </table> <hr/> <table> <tr> <td>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</td> </tr> <tr> <td>State: District:</td> <td></td> </tr> </table>	City Hartford	State CT	Zip Code 06106	Purpose of Disbursement Taxes	<div>Category/ Type</div>	Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:		Transaction ID: BFA55481B2D034437A8E Date of Disbursement <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 5 / 2 0 1 0</div> <hr/> Amount of Each Disbursement this Period <div>69.26</div>
City Hartford	State CT	Zip Code 06106									
Purpose of Disbursement Taxes	<div>Category/ Type</div>										
Candidate Name											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼										
State: District:											
B. Full Name (Last, First, Middle Initial) CT Dept Taxation <hr/> Mailing Address 25 Sigourney St. <hr/> <table> <tr> <td>City Hartford</td> <td>State CT</td> <td>Zip Code 06106</td> </tr> </table> <hr/> <table> <tr> <td>Purpose of Disbursement Taxes</td> <td rowspan="2"><div>Category/ Type</div></td> </tr> <tr> <td>Candidate Name</td> </tr> </table> <hr/> <table> <tr> <td>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</td> </tr> <tr> <td>State: District:</td> <td></td> </tr> </table>	City Hartford	State CT	Zip Code 06106	Purpose of Disbursement Taxes	<div>Category/ Type</div>	Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:		Transaction ID: B3C460D98495C4BD1993 Date of Disbursement <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 5 / 2 0 1 0</div> <hr/> Amount of Each Disbursement this Period <div>81.71</div>
City Hartford	State CT	Zip Code 06106									
Purpose of Disbursement Taxes	<div>Category/ Type</div>										
Candidate Name											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼										
State: District:											
C. Full Name (Last, First, Middle Initial) CT Dept Taxation <hr/> Mailing Address 25 Sigourney St. <hr/> <table> <tr> <td>City Hartford</td> <td>State CT</td> <td>Zip Code 06106</td> </tr> </table> <hr/> <table> <tr> <td>Purpose of Disbursement Taxes</td> <td rowspan="2"><div>Category/ Type</div></td> </tr> <tr> <td>Candidate Name</td> </tr> </table> <hr/> <table> <tr> <td>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</td> </tr> <tr> <td>State: District:</td> <td></td> </tr> </table>	City Hartford	State CT	Zip Code 06106	Purpose of Disbursement Taxes	<div>Category/ Type</div>	Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:		Transaction ID: B26DA999AC412480F8B4 Date of Disbursement <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 1 0</div> <hr/> Amount of Each Disbursement this Period <div>34.13</div>
City Hartford	State CT	Zip Code 06106									
Purpose of Disbursement Taxes	<div>Category/ Type</div>										
Candidate Name											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼										
State: District:											

SUBTOTAL of Disbursements This Page (optional) ►

185.10

TOTAL This Period (last page this line number only) ►

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) DC Dept Taxation	Transaction ID: BBCCEBAAC9A9C461EA71 Date of Disbursement																				
Mailing Address P.O. Box 470	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	5		2	0	1	0												
City Washington State DC Zip Code 20044	Amount of Each Disbursement this Period																				
Purpose of Disbursement Taxes	<table border="1"> <tr> <td colspan="10">1291.00</td> </tr> </table>	1291.00																			
1291.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) DC Dept Taxation	Transaction ID: BDB9ADD475DC442B4B29 Date of Disbursement																				
Mailing Address P.O. Box 470	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		1	5		2	0	1	0												
City Washington State DC Zip Code 20044	Amount of Each Disbursement this Period																				
Purpose of Disbursement Taxes	<table border="1"> <tr> <td colspan="10">543.00</td> </tr> </table>	543.00																			
543.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) DC Dept Taxation	Transaction ID: B3BF7B2BFBC814611AFB Date of Disbursement																				
Mailing Address P.O. Box 470	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	5		2	0	1	0												
City Washington State DC Zip Code 20044	Amount of Each Disbursement this Period																				
Purpose of Disbursement Taxes	<table border="1"> <tr> <td colspan="10">543.00</td> </tr> </table>	543.00																			
543.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

2377.00

TOTAL This Period (last page this line number only)

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X	23		24		25		26		27a
	27b		28a		28b		28c		29

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Haitian Health Foundation

Mailing Address

97 Sherman Street
ATT: Jeremiah Lowney

CityNorwichStateCTZip Code06360

Purpose of DisbursementContribution for Haitian Relief

Candidate Name

Category/
Type

Office Sought:

House

Senate

President

Disbursement For: 2008

X

 Primary General Other (specify) ▼

State:District:

Transaction ID: B775B14AE5D0A4FD086E

Date of Disbursement

M

M

/

D

D

/

Y

Y

Y

Y

04

16

2010

Amount of Each Disbursement this Period

2500.00

B.

Full Name (Last, First, Middle Initial)

IRS

Mailing Address

P.O. Box 8530

CityPhiladelphiaStatePAZip Code19162

Purpose of DisbursementTaxes

Candidate Name

Category/
Type

Office Sought:

House

Senate

President

Disbursement For: 2008

X

 Primary General Other (specify) ▼

State:District:

Transaction ID: BAC108529915F4E40A59

Date of Disbursement

M

M

/

D

D

/

Y

Y

Y

Y

04

01

2010

Amount of Each Disbursement this Period

369.68

C.

Full Name (Last, First, Middle Initial)

IRS

Mailing Address

P.O. Box 8530

CityPhiladelphiaStatePAZip Code19162

Purpose of DisbursementTaxes

Candidate Name

Category/
Type

Office Sought:

House

Senate

President

Disbursement For: 2008

X

 Primary General Other (specify) ▼

State:District:

Transaction ID: BC5AC1A9DEA404396ACF

Date of Disbursement

M

M

/

D

D

/

Y

Y

Y

Y

04

15

2010

Amount of Each Disbursement this Period

6964.97

SUBTOTAL of Disbursements This Page (optional)

9834.65

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) IRS	Transaction ID: BD80E51EDCAB94042B6F Date of Disbursement																				
Mailing Address P.O. Box 8530	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		1	5		2	0	1	0												
City Philadelphia State PA Zip Code 19162 Purpose of Disbursement Taxes Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>2</td><td>8</td><td>1</td><td>1</td><td>.</td><td>9</td><td>1</td> </tr> </table>	2	8	1	1	.	9	1													
2	8	1	1	.	9	1															
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) IRS	Transaction ID: B4C8588CB25254965837 Date of Disbursement																				
Mailing Address P.O. Box 8530	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	5		2	0	1	0												
City Philadelphia State PA Zip Code 19162 Purpose of Disbursement Taxes Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>2</td><td>5</td><td>8</td><td>4</td><td>.</td><td>6</td><td>5</td> </tr> </table>	2	5	8	4	.	6	5													
2	5	8	4	.	6	5															
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) NH Dept Taxation	Transaction ID: B18DF30197ED34C5AA80 Date of Disbursement																				
Mailing Address 45 Chenell Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	5		2	0	1	0												
City Concord State NH Zip Code 03301 Purpose of Disbursement Tax Payment Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>4</td><td>8</td><td>8</td><td>1</td><td>.</td><td>9</td><td>9</td> </tr> </table>	4	8	8	1	.	9	9													
4	8	8	1	.	9	9															
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

10278.55

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 31 / 62

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) NV Dept Taxation	Transaction ID: B143F697D3B344C64920 Date of Disbursement																				
Mailing Address P.O. Box 52685	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	1		2	0	1	0												
City Phoenix State NV Zip Code 85072	Amount of Each Disbursement this Period																				
Purpose of Disbursement Taxes	<table border="1"> <tr> <td colspan="10">234.54</td> </tr> </table>	234.54																			
234.54																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Perkins Coie	Transaction ID: B5A347F383C0C462C9DC Date of Disbursement																				
Mailing Address Centralized Accouting Dept. 1201 Third Ave., 40th Floor	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	3		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	3		2	0	1	0												
City Seattle State WA Zip Code 98101-3099	Amount of Each Disbursement this Period																				
Purpose of Disbursement Legal Consulting Services	<table border="1"> <tr> <td colspan="10">5000.00</td> </tr> </table>	5000.00																			
5000.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Perkins Coie	Transaction ID: B3246C8CF57E248889E3 Date of Disbursement																				
Mailing Address Centralized Accouting Dept. 1201 Third Ave., 40th Floor	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		2	1		2	0	1	0												
City Seattle State WA Zip Code 98101-3099	Amount of Each Disbursement this Period																				
Purpose of Disbursement Legal Consulting Services	<table border="1"> <tr> <td colspan="10">5000.00</td> </tr> </table>	5000.00																			
5000.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

10234.54

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 32 / 62

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Perkins Coie

Mailing Address Centralized Accouting Dept.
1201 Third Ave., 40th Floor

City State Zip Code
Seattle WA 98101-3099

Purpose of Disbursement
Legal Consulting Services

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B0B4EDF5773B44E89AF0

Date of Disbursement

04 / 12 / 2010

Amount of Each Disbursement this Period

60000.00

B.

Full Name (Last, First, Middle Initial)

Kathryn Damato

Mailing Address 10 Blackhawk Lane

City State Zip Code
West Hartford CT 06117-2903

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B8A388871810246F2A8B

Date of Disbursement

04 / 01 / 2010

Amount of Each Disbursement this Period

1067.36

C.

Full Name (Last, First, Middle Initial)

Kathryn Damato

Mailing Address 10 Blackhawk Lane

City State Zip Code
West Hartford CT 06117-2903

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B612230CDA51C41268F5

Date of Disbursement

04 / 15 / 2010

Amount of Each Disbursement this Period

1067.36

SUBTOTAL of Disbursements This Page (optional)

62134.72

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) Kathryn Damato	Transaction ID: B28E5A6AE88644ED0979 Date of Disbursement																				
Mailing Address 10 Blackhawk Lane	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		1	5		2	0	1	0												
City West Hartford State CT Zip Code 06117-2903	Amount of Each Disbursement this Period																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">1795.26</td> </tr> </table>	1795.26																			
1795.26																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type																					
B. Full Name (Last, First, Middle Initial) Kathryn Damato	Transaction ID: B2165554D4E144465A19 Date of Disbursement																				
Mailing Address 10 Blackhawk Lane	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	5		2	0	1	0												
City West Hartford State CT Zip Code 06117-2903	Amount of Each Disbursement this Period																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">1248.47</td> </tr> </table>	1248.47																			
1248.47																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type																					
C. Full Name (Last, First, Middle Initial) Haroon Khan	Transaction ID: B0000E27EE63F4629AAE Date of Disbursement																				
Mailing Address 770 5th Street NW Apt. # 308	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	5		2	0	1	0												
City Washington State DC Zip Code 20001-2649	Amount of Each Disbursement this Period																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">9337.73</td> </tr> </table>	9337.73																			
9337.73																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type																					

SUBTOTAL of Disbursements This Page (optional)

12381.46

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)
Haroon Khan

Mailing Address 770 5th Street NW
Apt. # 308

City Washington State DC Zip Code 20001-2649

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: BCBE426C6E80746D48A5

Date of Disbursement

05 / 15 / 2010

Amount of Each Disbursement this Period

5845.00

B.

Full Name (Last, First, Middle Initial)
Haroon Khan

Mailing Address 770 5th Street NW
Apt. # 308

City Washington State DC Zip Code 20001-2649

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: BF624290A470D4B9F84A

Date of Disbursement

06 / 15 / 2010

Amount of Each Disbursement this Period

5845.00

SUBTOTAL of Disbursements This Page (optional)

11690.00

TOTAL This Period (last page this line number only)

124658.67

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
The Immediacy Group

Nature of Debt (Purpose):
Television

Mailing Address 1800 S Street

City State ZIP Code
Washington DC 20009

Outstanding Balance Beginning This Period

45000.00

Transaction ID: D4C86C8799F3445D78A5

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

45000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
The Immediacy Group

Nature of Debt (Purpose):
Television

Mailing Address 1800 S Street

City State ZIP Code
Washington DC 20009

Outstanding Balance Beginning This Period

65000.00

Transaction ID: D6EC88DE849224213A22

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

65000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Des Moines Theatrical Shop

Nature of Debt (Purpose):
Costume Rental

Mailing Address 145 5th Street

City State ZIP Code
West Des Moines IA 50265

Outstanding Balance Beginning This Period

106.00

Transaction ID: D7952AAF64B9C4F0997B

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

106.00

1) **SUBTOTALS** This Period This Page (optional).....

110106.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 36 / 62

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
The Immediacy GroupNature of Debt (Purpose):
Television

Mailing Address 1800 S Street

City State ZIP Code
Washington DC 20009

Outstanding Balance Beginning This Period

50000.00

Transaction ID: DE079EBE7C9854073A8E

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

50000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
DC TreasurerNature of Debt (Purpose):
Parking FineMailing Address Adjudication Services
PO Box 2014City State ZIP Code
Washington DC 20013

Outstanding Balance Beginning This Period

5.00

Transaction ID: DF17F5AFCCC744C43A1E

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Newman and Leventhal Caterers, Inc.Nature of Debt (Purpose):
Caterer

Mailing Address 45 West 81st Street

City State ZIP Code
New York NY 10024-6025

Outstanding Balance Beginning This Period

2136.07

Transaction ID: D2FDEA7A6FB3F461FA7F

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2136.07

1) **SUBTOTALS** This Period This Page (optional).....

52141.07

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Embarq

Nature of Debt (Purpose):
Telephone

Mailing Address PO Box 660068

City State ZIP Code
Dallas TX 75266

Outstanding Balance Beginning This Period

1064.16

Transaction ID: DBF0B293CD60A40ED8E0

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1064.16

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Embarq

Nature of Debt (Purpose):
Telephone

Mailing Address PO Box 660068

City State ZIP Code
Dallas TX 75266

Outstanding Balance Beginning This Period

378.82

Transaction ID: DF4A4422265684FB29B9

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

378.82

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Verizon

Nature of Debt (Purpose):
Monthly Phone Charges

Mailing Address 8808 Irvine Center Drive

City State ZIP Code
Irvine CA 92618-4201

Outstanding Balance Beginning This Period

153.03

Transaction ID: D40B8D89E3ABE4545B3C

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

153.03

1) **SUBTOTALS** This Period This Page (optional).....

1596.01

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
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numbered line)

PAGE 38 / 62

FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Verizon

Nature of Debt (Purpose):
Monthly Phone Charges

Mailing Address 8808 Irvine Center Drive

City	State	ZIP Code
Irvine	CA	92618-4201

Outstanding Balance Beginning This Period

364.55

Transaction ID: DC3EE07A89ADF414596B

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

364.55

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Verizon

Nature of Debt (Purpose):
Monthly Phone Charges

Mailing Address 8808 Irvine Center Drive

City	State	ZIP Code
Irvine	CA	92618-4201

Outstanding Balance Beginning This Period

561.93

Transaction ID: DA1C685B9BF4F4CD7A76

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

561.93

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Verizon

Nature of Debt (Purpose):
Monthly Phone Charges

Mailing Address 8808 Irvine Center Drive

City	State	ZIP Code
Irvine	CA	92618-4201

Outstanding Balance Beginning This Period

660.55

Transaction ID: D0F58D7FEFA5B4E43939

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

660.55

1) **SUBTOTALS** This Period This Page (optional).....

1587.03

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
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numbered line)

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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Free Media, Inc.Nature of Debt (Purpose):
Reimbursement for Phone
ExpensesMailing Address 777 West End Avenue
#5CCity State ZIP Code
New York NY 10025

Outstanding Balance Beginning This Period

150.09

Transaction ID: D142C4EE26CC3459DA22

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

150.09

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
The TelegraphNature of Debt (Purpose):
Subscription

Mailing Address PO Box 1008

City State ZIP Code
Nashua NH 03061

Outstanding Balance Beginning This Period

20.81

Transaction ID: D1D76CBB4EBC7498F81D

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

20.81

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Interstate Power and Light Co.Nature of Debt (Purpose):
Utilities

Mailing Address PO Box 5007

City State ZIP Code
Dubuque IA 52004-5007

Outstanding Balance Beginning This Period

250.36

Transaction ID: DF8C3EA191F814F5C94C

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

250.36

1) **SUBTOTALS** This Period This Page (optional).....

421.26

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
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numbered line)

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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Carter PrintingNature of Debt (Purpose):
Printing

Mailing Address 1739 East Grand Avenue

City State ZIP Code
Des Moines IA 50316

Outstanding Balance Beginning This Period

7233.31

Transaction ID: D3239DDE2C2B14D02B40

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

7233.31

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
MoreSound CompanyNature of Debt (Purpose):
Sound Equipment

Mailing Address 102 North Street

City State ZIP Code
Jaffrey NH 03452-5301

Outstanding Balance Beginning This Period

400.00

Transaction ID: D4310E2A2AC3D49AFB1C

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

400.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
ComcastNature of Debt (Purpose):
Cable Service

Mailing Address P.O. Box 3005

City State ZIP Code
Southeastern PA 19398-3005

Outstanding Balance Beginning This Period

197.56

Transaction ID: D1327435AF7974016BBD

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

197.56

1) SUBTOTALS This Period This Page (optional).....

7830.87

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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numbered line)

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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
ComcastNature of Debt (Purpose):
Cable

Mailing Address P.O. Box 3005

City State ZIP Code
Southeastern PA 19398-3005

Outstanding Balance Beginning This Period

130.78

Transaction ID: D77C21BCA099B4529A8B

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

130.78

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Geoff LuxenbergNature of Debt (Purpose):
Reimbursement for Gas/Pay-
ment for signat

Mailing Address 249A New State Road

City State ZIP Code
Manchester CT 06042-7959

Outstanding Balance Beginning This Period

107.00

Transaction ID: D3BEB98490D8F4B87A07

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

107.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Kilkenney'sNature of Debt (Purpose):
Food & Beverage

Mailing Address 300 West 3rd Street

City State ZIP Code
Davenport IA 52801-1208

Outstanding Balance Beginning This Period

220.00

Transaction ID: DE9F171102B294984BCD

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

220.00

1) SUBTOTALS This Period This Page (optional).....

457.78

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 42 / 62

FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Comcast

Nature of Debt (Purpose):
Cable & Internet

Mailing Address PO Box 1577

City State ZIP Code
Newark NJ 07101

Outstanding Balance Beginning This Period

351.30

Transaction ID: D3A3A16E658A34B44B21

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

351.30

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Comcast

Nature of Debt (Purpose):
Cable Service

Mailing Address PO Box 1577

City State ZIP Code
Newark NJ 07101

Outstanding Balance Beginning This Period

513.74

Transaction ID: D054E2AB68F284AAA9A7

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

513.74

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Direct TV

Nature of Debt (Purpose):
Cable Service

Mailing Address PO Box 60036

City State ZIP Code
Los Angeles CA 90060

Outstanding Balance Beginning This Period

83.52

Transaction ID: D8A78FBAECFAE431F9D3

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

83.52

1) **SUBTOTALS** This Period This Page (optional).....

948.56

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 43 / 62

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
KeyspanNature of Debt (Purpose):
Utilities

Mailing Address 52 Second Avenue

City State ZIP Code
Waltham MA 02451

Outstanding Balance Beginning This Period

239.04

Transaction ID: DD0258CA80C884AB6960

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

239.04

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
KeyspanNature of Debt (Purpose):
Utilities

Mailing Address 52 Second Avenue

City State ZIP Code
Waltham MA 02451

Outstanding Balance Beginning This Period

1481.16

Transaction ID: DDFA00C779CF445C8AA6

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1481.16

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
WHO Newsradio 1040Nature of Debt (Purpose):
Recording Services

Mailing Address 2141 Grand Avenue

City State ZIP Code
Des Moines IA 50312

Outstanding Balance Beginning This Period

400.00

Transaction ID: D5CA66406DA5143F7848

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

400.00

1) **SUBTOTALS** This Period This Page (optional).....

2120.20

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 44 / 62

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Alliant EnergyNature of Debt (Purpose):
Utilities

Mailing Address PO Box 3066

City State ZIP Code
Cedar Rapids IA 52406

Outstanding Balance Beginning This Period

877.55

Transaction ID: D6F4061A34DE04783A3F

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

877.55

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
VerizonNature of Debt (Purpose):
Telephone

Mailing Address P.O. Box 15041

City State ZIP Code
Worcester MA 01615-0023

Outstanding Balance Beginning This Period

983.75

Transaction ID: DAC79A50A402441AB9DA

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

983.75

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
VFW Post 775Nature of Debt (Purpose):
Space Rental

Mailing Address 702 West Main Street

City State ZIP Code
Ottumwa IA 52501-2226

Outstanding Balance Beginning This Period

150.00

Transaction ID: D9F4487EF4F6F4DB6923

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

150.00

1) **SUBTOTALS** This Period This Page (optional).....

2011.30

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Zahara's Cafe & Bakery, Inc.

Nature of Debt (Purpose):
Food & Beverage

Mailing Address 525 Washington Blvd, 2nd Flr

City State ZIP Code
Jersey City NJ 07310

Outstanding Balance Beginning This Period

2500.00

Transaction ID: DD281F4AE8DC34BC7B93

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
REMAX Results Realty

Nature of Debt (Purpose):
Rent and Utilities

Mailing Address 202 1st NW

City State ZIP Code
Mason City IA 50401

Outstanding Balance Beginning This Period

1036.46

Transaction ID: D14F42980C9EF465D8A0

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1036.46

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Cox Communications

Nature of Debt (Purpose):
Internet Services

Mailing Address PO Box 6059

City State ZIP Code
Cypress CA 90630

Outstanding Balance Beginning This Period

138.02

Transaction ID: DEAEBC41D358C496EAE8B

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

138.02

1) **SUBTOTALS** This Period This Page (optional).....

3674.48

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
MidAmerican EnergyNature of Debt (Purpose):
Utilities

Mailing Address P.O. Box 8020

City State ZIP Code
Davenport IA 52808-8020

Outstanding Balance Beginning This Period

78.77

Transaction ID: D2F929A7374FC4A50B84

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

78.77

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
MidAmerican EnergyNature of Debt (Purpose):
Utilities

Mailing Address P.O. Box 8020

City State ZIP Code
Davenport IA 52808-8020

Outstanding Balance Beginning This Period

811.87

Transaction ID: DF6D9496BDF604118AD8

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

811.87

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Verham NewsNature of Debt (Purpose):
Rent

Mailing Address P.O. Box 706

City State ZIP Code
White Riv Jct VT 05001-0706

Outstanding Balance Beginning This Period

910.28

Transaction ID: DE2E3D979014F4B2194A

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

910.28

1) **SUBTOTALS** This Period This Page (optional).....

1800.92

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Big Ten Rentals, Inc.Nature of Debt (Purpose):
Bases

Mailing Address 1820 Boyrum St

City State ZIP Code
Iowa City IA 52240-4555

Outstanding Balance Beginning This Period

34.82

Transaction ID: D9CE80039AE0F470B870

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

34.82

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Waste ManagementNature of Debt (Purpose):
Utilities

Mailing Address PO Box 756

City State ZIP Code
Des Moines IA 50303

Outstanding Balance Beginning This Period

266.02

Transaction ID: D13EE948ED74B4BE0B66

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

266.02

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Waste ManagementNature of Debt (Purpose):
Utilities

Mailing Address PO Box 756

City State ZIP Code
Des Moines IA 50303

Outstanding Balance Beginning This Period

149.94

Transaction ID: D26D95FA926E146209F5

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

149.94

1) **SUBTOTALS** This Period This Page (optional).....

450.78

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Storefront Political MediaNature of Debt (Purpose):
Photographer

Mailing Address 250 Sutter Street, Suite 650

City State ZIP Code
San Francisco CA 94108

Outstanding Balance Beginning This Period

537.08

Transaction ID: DDB39DC1EDB03445B8B5

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

537.08

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
MediacomNature of Debt (Purpose):
Cable

Mailing Address P.O. Box 5744

City State ZIP Code
Carol Stream IL 60197-5744

Outstanding Balance Beginning This Period

19.14

Transaction ID: DBAEE80A9C8F14CBF964

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

19.14

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
MediacomNature of Debt (Purpose):
Cable

Mailing Address P.O. Box 5744

City State ZIP Code
Carol Stream IL 60197-5744

Outstanding Balance Beginning This Period

92.37

Transaction ID: D34D4235A01F441BAA58

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

92.37

1) SUBTOTALS This Period This Page (optional).....

648.59

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
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numbered line)

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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Heartland Flagpoles and FlagsNature of Debt (Purpose):
Flags

Mailing Address 3719 SW 9th Street

City State ZIP Code
Des Moines IA 50315

Outstanding Balance Beginning This Period

436.60

Transaction ID: D42D026888D4F47D198F

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

436.60

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Extra Space StorageNature of Debt (Purpose):
Storage

Mailing Address 132 Silas Deane Highway

City State ZIP Code
Wethersfield CT 06109

Outstanding Balance Beginning This Period

89.04

Transaction ID: DAA10574E87F546189CE

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

89.04

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Drink More WaterNature of Debt (Purpose):
Water DeliveryMailing Address Montgomery County Airpark
7595-A Rickenbacker DriveCity State ZIP Code
Gaithersburg MD 20879

Outstanding Balance Beginning This Period

32.50

Transaction ID: DCDE895EA2CFC4A338ED

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

32.50

1) **SUBTOTALS** This Period This Page (optional).....

558.14

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
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numbered line)

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FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Qwest

Nature of Debt (Purpose):
Telephone

Mailing Address Business Services
PO Box 91154

City State ZIP Code
Seattle WA 98111

Outstanding Balance Beginning This Period

1062.75

Transaction ID: D61C348CBB0624AED874

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1062.75

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Qwest

Nature of Debt (Purpose):
Telephone

Mailing Address Business Services
PO Box 91154

City State ZIP Code
Seattle WA 98111

Outstanding Balance Beginning This Period

669.82

Transaction ID: D6224518C358E4E34936

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

669.82

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Qwest

Nature of Debt (Purpose):
Telephone

Mailing Address Business Services
PO Box 91154

City State ZIP Code
Seattle WA 98111

Outstanding Balance Beginning This Period

474.82

Transaction ID: DD4C14996C4ED457DBEB

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

474.82

1) **SUBTOTALS** This Period This Page (optional).....

2207.39

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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numbered line)

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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
QwestNature of Debt (Purpose):
TelephoneMailing Address Business Services
PO Box 91154City State ZIP Code
Seattle WA 98111

Outstanding Balance Beginning This Period

657.85

Transaction ID: D160BB52601F3469FBFA

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

657.85

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
QwestNature of Debt (Purpose):
TelephoneMailing Address Business Services
PO Box 91154City State ZIP Code
Seattle WA 98111

Outstanding Balance Beginning This Period

471.50

Transaction ID: DE70EBFB35F4E4F5BBA8

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

471.50

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
QwestNature of Debt (Purpose):
TelephoneMailing Address Business Services
PO Box 91154City State ZIP Code
Seattle WA 98111

Outstanding Balance Beginning This Period

58.58

Transaction ID: DC07FD8583E3F4BA58CA

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

58.58

1) SUBTOTALS This Period This Page (optional).....

1187.93

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
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numbered line)

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FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Qwest

Nature of Debt (Purpose):
Telephone

Mailing Address Business Services
PO Box 91154

City State ZIP Code
Seattle WA 98111

Outstanding Balance Beginning This Period

418.15

Transaction ID: DA397374A80A8418D9FD

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

418.15

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Qwest

Nature of Debt (Purpose):
Telephone

Mailing Address Business Services
PO Box 91154

City State ZIP Code
Seattle WA 98111

Outstanding Balance Beginning This Period

575.42

Transaction ID: DA3182C7E844C4F039CE

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

575.42

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Qwest

Nature of Debt (Purpose):
Telephone

Mailing Address Business Services
PO Box 91154

City State ZIP Code
Seattle WA 98111

Outstanding Balance Beginning This Period

431.46

Transaction ID: D703363A20B0E44A7A6C

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

431.46

1) **SUBTOTALS** This Period This Page (optional).....

1425.03

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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numbered line)

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FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Qwest

Nature of Debt (Purpose):
Telephone

Mailing Address Business Services
PO Box 91154

City State ZIP Code
Seattle WA 98111

Outstanding Balance Beginning This Period

106.73

Transaction ID: DE2EA2BD913EF4C59A0F

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

106.73

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Qwest

Nature of Debt (Purpose):
Telephone

Mailing Address Business Services
PO Box 91154

City State ZIP Code
Seattle WA 98111

Outstanding Balance Beginning This Period

677.36

Transaction ID: DF660180FF5C543E886F

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

677.36

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Qwest

Nature of Debt (Purpose):
Telephone

Mailing Address Business Services
PO Box 91154

City State ZIP Code
Seattle WA 98111

Outstanding Balance Beginning This Period

622.51

Transaction ID: DA75CCBF704CB4716B86

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

622.51

1) **SUBTOTALS** This Period This Page (optional).....

1406.60

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
AT&TNature of Debt (Purpose):
Telephone

Mailing Address P.O. Box 8110

City State ZIP Code
Aurora IL 60572

Outstanding Balance Beginning This Period

1055.11

Transaction ID: D561E5E0579E7422A8F4

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1055.11

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
U.S. Express Inc.Nature of Debt (Purpose):
Courier Services

Mailing Address 3240 Hubbard Road

City State ZIP Code
Landover MD 20785

Outstanding Balance Beginning This Period

160.24

Transaction ID: D80871DA60A7642ADAA1

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

160.24

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Old Town Family RestaurantNature of Debt (Purpose):
Food & Beverage

Mailing Address 2107 Camanche Avenue

City State ZIP Code
Clinton IA 52732-6036

Outstanding Balance Beginning This Period

130.00

Transaction ID: D8B59DA12044449C0AE9

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

130.00

1) SUBTOTALS This Period This Page (optional).....

1345.35

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
COVAD

Nature of Debt (Purpose):
Internet Services

Mailing Address Dept. 33408
PO BOX 39000

City State ZIP Code
San Francisco CA 94139

Outstanding Balance Beginning This Period

1535.76

Transaction ID: D5E78BD6138D849C8A7B

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1535.76

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
COVAD

Nature of Debt (Purpose):
Internet Services

Mailing Address Dept. 33408
PO BOX 39000

City State ZIP Code
San Francisco CA 94139

Outstanding Balance Beginning This Period

1056.76

Transaction ID: D7FB209F7C488450BA73

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1056.76

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Home Front Communications

Nature of Debt (Purpose):
Video

Mailing Address 1121 14th Street NW

City State ZIP Code
Washington DC 20005-5641

Outstanding Balance Beginning This Period

6000.00

Transaction ID: D9C275736AC4E46B69DC

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6000.00

1) **SUBTOTALS** This Period This Page (optional).....

8592.52

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Verizon

Nature of Debt (Purpose):
Telephone

Mailing Address PO Box 660720

City State ZIP Code
Dallas TX 75266

Outstanding Balance Beginning This Period

22.28

Transaction ID: DF9E84213BC0C4FA4959

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

22.28

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Verizon

Nature of Debt (Purpose):
Telephone

Mailing Address PO Box 660720

City State ZIP Code
Dallas TX 75266

Outstanding Balance Beginning This Period

6277.73

Transaction ID: D0A801840ADAA424FBF4

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6277.73

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Jim VanDusseldorp

Nature of Debt (Purpose):
Bus Servicing

Mailing Address 2406 15th Ave. N.

City State ZIP Code
Clear Lake IA 50428-2037

Outstanding Balance Beginning This Period

92.50

Transaction ID: DECE5259C4BB240ADBB7

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

92.50

1) **SUBTOTALS** This Period This Page (optional).....

6392.51

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Peter Nichols

Nature of Debt (Purpose):
Consulting Fee

Mailing Address 222 Stony Brook Road

City State ZIP Code
Hopewell NJ 08525-3003

Outstanding Balance Beginning This Period

15000.00

Transaction ID: DE18E31E6A6564CF4B75

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

15000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Grand Colony

Nature of Debt (Purpose):
Lodging

Mailing Address 2824 Grand Avenue, #218

City State ZIP Code
Des Moines IA 50312

Outstanding Balance Beginning This Period

153.50

Transaction ID: D232577C9B94046BB9A9

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

153.50

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Verizon Corporate Real Estate

Nature of Debt (Purpose):
Rent

Mailing Address Mail Code FLG1-300
8800 Adamo Drive

City State ZIP Code
Tampa FL 33619

Outstanding Balance Beginning This Period

23250.00

Transaction ID: D3856747E818749188BE

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

23250.00

1) **SUBTOTALS** This Period This Page (optional).....

38403.50

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Trumba CorporationNature of Debt (Purpose):
SubscriptionMailing Address 1200 5th Ave.
Suite 1700City State ZIP Code
Seattle WA 98101

Outstanding Balance Beginning This Period

1199.40

Transaction ID: DF4C21A8864FF4D46B53

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1199.40

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
UPSNature of Debt (Purpose):
Courier

Mailing Address PO Box 7247-0244

City State ZIP Code
Philadelphia PA 19170

Outstanding Balance Beginning This Period

59.95

Transaction ID: DD71C9A3EFA0F4512B37

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

59.95

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
AT&TNature of Debt (Purpose):
Telephone

Mailing Address P.O. Box 8110

City State ZIP Code
Aurora IL 60572

Outstanding Balance Beginning This Period

623.00

Transaction ID: D4FFB54806211448B923

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

623.00

1) **SUBTOTALS** This Period This Page (optional).....

1882.35

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 59 / 62

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Cedric WilliamsNature of Debt (Purpose):
Car repair

Mailing Address 4401 Aldrich Avenue S

City State ZIP Code
Minneapolis MN 55419-4821

Outstanding Balance Beginning This Period

3197.74

Transaction ID: D80F5A221749E4D8CAFD

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3197.74

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Cedric WilliamsNature of Debt (Purpose):
Car Repair

Mailing Address 4401 Aldrich Avenue S

City State ZIP Code
Minneapolis MN 55419-4821

Outstanding Balance Beginning This Period

280.43

Transaction ID: D65530D3150B143C5BDD

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

280.43

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Cedric WilliamsNature of Debt (Purpose):
Car Rental

Mailing Address 4401 Aldrich Avenue S

City State ZIP Code
Minneapolis MN 55419-4821

Outstanding Balance Beginning This Period

748.02

Transaction ID: DAC0405B098BA40BDB8F

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

748.02

1) **SUBTOTALS** This Period This Page (optional).....

4226.19

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 60 / 62

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Secured ShredNature of Debt (Purpose):
Shredding

Mailing Address 624 Wilmont Ridge Road

City State ZIP Code
Westminster MD 21157-7318

Outstanding Balance Beginning This Period

120.00

Transaction ID: D5880C9A067654615B51

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

120.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Hertz

Nature of Debt (Purpose):

Mailing Address 333 W. Harbor Drive

City State ZIP Code
San Diego CA 92101

Outstanding Balance Beginning This Period

4111.17

Transaction ID: DA142EB9576294B0793E

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4111.17

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Universal Printing Company LLCNature of Debt (Purpose):
Printing

Mailing Address 1205 O'Neill Highway

City State ZIP Code
Dunmore PA 18512-1723

Outstanding Balance Beginning This Period

348.36

Transaction ID: D68AD64DCDC624C69A94

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

348.36

1) SUBTOTALS This Period This Page (optional).....

4579.53

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 61 / 62

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Universal Printing Company LLCNature of Debt (Purpose):
Printing

Mailing Address 1205 O'Neill Highway

City State ZIP Code
Dunmore PA 18512-1723

Outstanding Balance Beginning This Period

2327.31

Transaction ID: D0A1C9B9020DA4F7F9B3

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2327.31

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Universal Printing Company LLCNature of Debt (Purpose):
Printing

Mailing Address 1205 O'Neill Highway

City State ZIP Code
Dunmore PA 18512-1723

Outstanding Balance Beginning This Period

136.05

Transaction ID: DF477C3FE35E04A05B7F

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

136.05

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Universal Printing Company LLCNature of Debt (Purpose):
Printing

Mailing Address 1205 O'Neill Highway

City State ZIP Code
Dunmore PA 18512-1723

Outstanding Balance Beginning This Period

485.08

Transaction ID: DC5C4695FC2C6478F875

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

485.08

1) SUBTOTALS This Period This Page (optional).....

2948.44

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
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numbered line)

PAGE 62 / 62

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Universal Printing Company LLCNature of Debt (Purpose):
Printing

Mailing Address 1205 O'Neill Highway

City State ZIP Code
Dunmore PA 18512-1723

Outstanding Balance Beginning This Period

411.45

Transaction ID: D0B46426F11F0465B888

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

411.45

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Perkins CoieNature of Debt (Purpose):
Yearly Consulting FeeMailing Address Centralized Accouting Dept.
1201 Third Ave., 40th FloorCity State ZIP Code
Seattle WA 98101-3099

Outstanding Balance Beginning This Period

60000.00

Transaction ID: D8CE59C7EC9C74AB89CB

Amount Incurred This Period

0.00

Payment This Period

60000.00

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional).....

411.45

2) **TOTALS** This Period (last page this line number only).....

261361.78

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

261361.78